

New Jersey Public Employment Relations Commission
NON-POLICE AND FIRE
COLLECTIVE NEGOTIATIONS AGREEMENT SUMMARY FORM

Line #

SECTION I: Parties and Term of Contracts

1	Public Employer:	BOROUGH OF ALLENDALE	County:	BERGEN
2	Employee Organization:	UNITED PUBLIC SERVICE EMPLOYEES UNION	Number of Employees in Unit:	
3	Base Year Contract Term:	1/1/2010 - 12/31/2015	New Contract Term:	
1/1/2016 - 12/31/2019				

SECTION II: Type of Contract Settlement (please check only one)

4 Contract settled without neutral assistance
 5 Contract settled with assistance of mediator
 6 Contract settled with assistance of fact-finder
 7 Contract settled with assistance of super-conciliator
 8 If contract was settled in fact-finding, did the fact-finder issue a report with recommendations?
 Yes No

SECTION III: Salary Base

The salary base is the cost of salaries in the final year of the expired or expiring agreement. This is the base cost from which the parties negotiate the salary increases.

9	Salary Costs in Base Year	\$ 460,616
10	Longevity Costs in Base Year	\$ 0
11	Total Salary Base	\$ 460,616

SECTION IV: Salary Increases for Each Year of New Agreement*

	Year 1	Year 2	Year 3	Year 4	Year 5
12 Effective Date (month/day/year)	1/1/2016	1/1/2017	1/1/2018	1/1/2019	
13 Cost of Salary Increments (\$)	-580	10,160	10,304	9,610	
14 Salary Increase Above Increments (\$)	0	0	0	0	
15 Longevity Increase (\$)	0	0	0	0	
16 Total \$ Increase (sum of lines 13-15)	-580	10,160	10,304	9,610	
17 New Salary Base (\$)	460,036	470,196	480,500	490,110	
18 Percentage increase over prior year	-.12 %	2 %	2 %	2 %	%

*If contract duration is longer than five years, please add an additional page.

SECTION V: Increases in Other Contractual Economic Items or Newly Added Economic Items*

**If contract duration is longer than five years, please add an additional page.*

SECTION VI: Medical Costs

		Base Year	Year 1
21	Health Plan Cost	\$ 102,385	\$ 93,651
22	Prescription Plan Cost	\$ 0	\$ 0
23	Dental Plan Cost	\$ 5,734	\$ 4,787
24	Vision Plan Cost	\$ 0	\$ 0
25	Total Cost of Insurance	\$ 108,119	\$ 98,438
26	Employee Insurance Contributions	\$ 12,456	\$ 27,701
27	Employee Contributions as % of Total Insurance Cost	12	% 28

Section VI: Medical Costs (continued)

28 Identify any insurance changes that were included in this CNA.

N/A

SECTION VII: Certification and Signature

29 The undersigned certifies that the foregoing figures are true:

Print Name: **M. ALISSA MAYER**

Position/Title: **CFO**

Signature: ***M. Alissa Mayer***

Date: ***1/21/2017***

Send this completed and signed form along with an electronic copy of the contract and the signed certification form to: contracts@perc.state.nj.us

NJ Public Employment Relations Commission

Conciliation and Arbitration

PO Box 429

Trenton, NJ 08625

Phone: 609-292-9898

Revised 8/2016